## PHARMACOLOGY—FDA APPROVED MEDS FOR SMOKING CESSATION

\*\*Combination Therapy Doubles Quit Rates \*\*\*Patches decrease withdrawal symptoms; gum, lozenges, nasal spray, etc. decrease urges to smoke.

Nicotine Patch—Generic or Nicoderm CQ Comes in 7 mg, 14 mg and 21 mg 20 cigs - needs 21 mg patch 10 cigs- needs 14 mg patch 5cigs- needs 7mg patch Heavy cigarette user may need to wear 2 patches at once initially if smoking 2ppd>

**Nicotine Lozenge**—Generic or Nicorette/Nicorette Mini—cherry or mint 2mg or 4mg TTFC less than 30 min, use 4mg; TTFC more than 30 min, use 2mg May use q 1-2 hours initially, max 20/day

Nicotine Gum—Generic or Nicorette—original, cinnamon, fruit, mint or orange 2 mg or 4 mg TTFC less than 30min, use 4mg; TTFC more than 30 min, use 2mg May use q 1-2 hours initially, max 24/day \*Yale program recommends using 15 minutes prior to usual cig to decrease urge.

Nicotine Nasal Spray—Nicotrol (prescription only) 1-2 doses/hr or 8-40 doses/day 1 dose= 2 sprays each nostril \*Yale program recommends using 15 minutes prior to usual cig to decrease urge.

Nicotine Oral Inhaler—Nicotrol inhaler (prescription only) 10 mg cartridge Initially, 1 cartridge q 1-2hrs, 6-16 per day Not intended to be inhaled into lungs, best if continuous puffing for 20 min \*Yale program recommends using 15 minutes prior to usual cig to decrease urge.

All other meds- Chantix and Bupropion - send case to PCP

TTFC= time to 1<sup>st</sup> cigarette

If a patient has a cig within 30 mins of awakening, it is indicative of increased addiction and thus increase dose of nicotine is needed.